

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | E.H. | | 06-08-CI |
| O.I.P.E. CLASSIFIER | | 43 | 6/26/01 |
| FORMALITY REVIEW | Tm | SC 864 | 07/31/01 |
| RESPONSE FORMALITY REVIEW | | | |

BEST AVAILABLE COPY

INDEX OF CLAIMS

| | | | |
|---------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - (Through numeral) | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Date |
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| Final | |
| Original | |
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| 3 | 5/22/01 |
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If more than 150 claims or 10 actions
staple additional sheet here

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